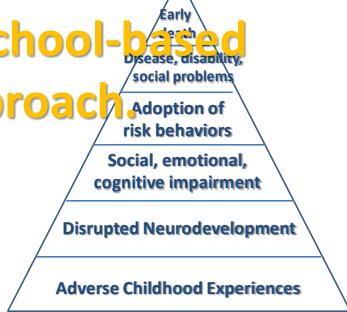


# What to do about ACES?

## A school-based approach



Dr. Dean Grace

### Agenda for training

Building resilient kids: *Because ACES are not a life sentence!*

1. Briefly review of the scope and impact of ACES
2. Describe what does a resilient kid looks like.
3. Review some of the evidence that resilience trumps ACES
4. Describe a **simple** (not easy), **proven** model to build resilience  
8 key assets that get kids "back on track" (for healthy development)
5. Provide evidence the model works

### A brief review: Adverse Childhood Experience Study (ACES) Minnesota student survey data

#### Household dysfunction

- Substance abuse 27%
- Divorce 23%
- Mental illness 17%
- Battered mother 13%
- Criminal behavior 6%

#### Neglect

- Emotional 15%
- Physical 10%

#### Abuse

- Psychological 11%
- Physical 28%
- Sexual 21%



People who report 4 or more ACES have significantly greater physical health problems than the general population. They are 4X more likely to experience mental illness. 16% of Minnesota youth experience 4 or more adverse experiences.  
(Same % predicted by PBIS.)

## Toxic stress: A brain on cortisol

- Aggressiveness, over reactions, and exaggerated withdrawal are attempts to feel safe and in control. These behaviors are the symptoms of trauma.
- As long as this aroused state persists cognitive functioning will be impaired.
- This impairment will reduce the capacity to process verbal information, attend, focus, retain and recall with obvious negative impact on academic performance.
  - unable to integrate rational ideas when upset,
  - difficult to calm down so you can talk through a problem




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## What is trauma?

- Trauma is a **sensory** (not cognitive) experience.
- It is experienced as an absence of a sense of safety, feeling vulnerable and powerless.
- It may be defined as a number of mental health disorders (PTSD, RAD, depression, ODD, etc.
- It need not be a life sentence.




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## What is being resilient?

- Having optimism about the future (optimism is learned)
- Believing that my life has purpose
- Believing I can make a difference (internal locus of control)
- Feeling unique and valuable (self-esteem)  
John Templeton Foundation
- Resilience is the opposite of feeling traumatized.



**Positive Identity, Self-efficacy  
and Resilience are the same**

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## Overcoming the bad hand they've been dealt



Trauma has two basic causes:

1. Bad things happened to you (lack of safety).
2. Good things did not happen for you (lack of love).

- "Before [troubled kids] can make any kind of lasting change at all in their behavior, they need to feel safe and loved."
- However, many ... interventions aimed at them get it backwards; they take a punitive approach and hope to lure the children into good behavior by restoring love and safety only if the children first start acting better." Dr. Bruce Perry, 2006

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## Start with the kid, not the behavior:



Most strategies which focus on specific behavior problems (symptoms) fail to address the underlying trauma.

### Instead - build resilience:

The development of resilience increases the effort youth exert to control their behavior problems and reduces symptoms of mental illness. (Eisenberg, et al., 2004)

*In other words, resilience empowers students to do for themselves what you are trying to do to them!*

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## How do we build resilience?

### "Ordinary magic"



First, kids need **supportive relationships, high expectations**, and opportunities to **participate and contribute** (Bernard, 2004).

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## Changing lives starts by providing 3 critical supports all kids need

### 1. Family Support

- Kids who eat 5 or more meals with their family each week do twice as well in school and have HALF the risk factors of kids who don't.
- The relative strength of family support is directly related to the frequency of family communication (Fulkerson, et al., 2006).

*How to strengthen? It's little everyday things that matter!*

*Encourage parents to:*

- Read regularly with young children,
- Talk about and display their pictures,
- Share meals as a family regularly,
- Ask about what your children learned today (ask everyday),
- Talk about their interests,
- Talk about their friends,
- Talk about their future plans (for tomorrow and when they graduate)
- If talking is hard, go on walks together, play catch, or go fishing.

- How will you measure your success as a parent?
- Talk about and model your values at every opportunity,

### 2. Adult mentors (adult support)

- Mentors can be a bridge to redefining and rebuilding relationships with parents, family members and peers (Jucovey, 2003).
- Adult mentors are uniquely effective in deterring violence among young adolescent males from single households (Oman et al., 2002; Reiniger et al., 2003).

*How?*

*Learn names and use them  
Praise effort when you see it  
Notice them, hair style/color, a nice sweater  
Share lunch time at their table  
Start a lunch break chess game, play HORSE, or share poetry reading.  
Coach or lead a club activity*

### 2. Positive peer relationships (peer support)

- Because at-risk youth typically affiliate with other low-status peers and are unlikely to be participating in relationships with more socially skilled peers, they may miss important opportunities for social skill development (Hoff, et al., 2003).

*How?*

*Teach and praise kind and respectful behavior  
Recruit high-functioning youth to serve as peer mentors  
Encourage all students to bring their sparks to school, engage them at the point of their passion*

## Two key developmental opportunities

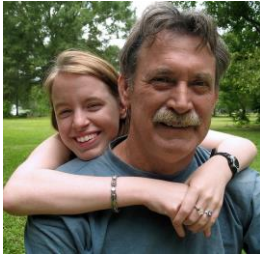
### 4. Program activities (opportunities to participate)

- Participation in organized groups reduces risk behavior and increases responsible conduct. (Scales, 2000; Murphey et al., 2004; Oman et al., 2002).
- Program activities are where kids engage with positive peers and receive adult guidance.
- Extra-curricular activities are also the only proven intervention to improve school performance. (Huang, et. al, 2006)

### 5. Community service (opportunities to contribute)

- Community service builds adolescent self-esteem, identity with their community, and a sense of being valued by the community (Oman et al., 2002; Murphey et al., 2004).

When (**and only when!**) these needs are met can we help youth develop skills, positive values - and a healthy self-concept. (Masten, 2001)



## Two essential skills

(Oman et al., 2002; Scales, 1999; Reiningier et al., 2003; Murphey et al., 2004)

### Decision-making Skills

1. Skill building should focus on strengthening assets for successful living rather than solely for risk avoidance (Botvin, 1995). Empowered youth have learned to live out their **values**.
2. Resilient kids, kids with positive self-identity, will screw up but they will take responsibility and learn.

### Friendship Skills

1. Kids learn social skills from other kids, not from adults!
2. Because at-risk youth typically affiliate with other low-status peers and are unlikely to be participating in relationships with more socially skilled peers, they miss important opportunities for social skill development (Hoff, et al., 2003).



## A key value: Achievement motivation

- Graduation is the number ONE predictor of adult success for foster kids! Only 23% of foster kids graduate (Casey Foundation). School success is the best way to build **HOPE** for the future.
- Extra-curricular participation is the key to academic success and provides critical protection from risk behaviors. Leads to student engagement. (Williams, MacMillan & Jamieson, 2006; Huang, et al., 2000). The key to learning is motivation!
- Finkelstein, Wamsley, and Miranda (2001) found that while teachers and parents tried to be supportive of troubled children in school, their focus tended to be on behavior. Expectations for academic success were low. These kids think they're dumb because of their poor grades. Provide opportunity to complete homework and learn study skills.

## The evidence

1. Grace (2008) conducted an experimental study that demonstrated developmental assets could be strengthened as a planned intervention. *(Subjects in the experimental group made TWICE the progress in treatment. The most traumatized students made the most progress.)*
2. Marti (2013) demonstrated a strong correlation between building the 8 assets and a reduction in the symptoms of mental illness (measured by the CASII).
3. Anderson's (2015) qualitative study of the asset-building model demonstrated youth understood how positive relationships strengthened their self-identity and led to positive behavior changes.

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## Resilience



- Building resilience has been shown to reduce risk behavior at all levels of trauma exposure with the moderating effect increasing with the severity of traumatic experiences (Griffin, Martinovich, Gawron & Lyons, 2009). *\*The people who brought you trauma-informed care!*

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## Key advantages of a strength-based vs symptom reduction approach

- At-risk kids are working toward the same goals as "normal" kids. Focus is on building strengths not on their problems.
- Parents understand our approach because it can be explained in plain English. Partnership improves.
- Resilience (by definition) is not dependent on environmental supports in the same way as behavior modification is.
- The primary mechanism used to teach new skills is reinforcement. Kids want to learn how to earn reinforcement.
- The intervention generally used to reduce behavior problems is punishment. Kids are adept at avoiding punishment.
- Reinforcement works significantly better. Want to be effective? Spend your time rewarding what you want.

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Questions?

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